

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

SEIU COPE (Service Employees International Union Committee On Political Education)

ADDRESS (number and street) ▼

1800 Massachusetts Ave NW

☐ Check if different than previously reported. (ACC)

Washington

DC

20036

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00004036

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☒ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Michael P. Fishman

Signature of Treasurer

Michael P. Fishman

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SEIU COPE (Service Employees International Union Committee On Political Education)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
01 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
01 / 31 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		14185041.74
(b) Cash on Hand at Beginning of Reporting Period.....	14185041.74	
(c) Total Receipts (from Line 19)	2346692.53	2346692.53
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	16531734.27	16531734.27
7. Total Disbursements (from Line 31)	1952868.62	1952868.62
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	14578865.65	14578865.65
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	294466.59	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

SEIU COPE (Service Employees International Union Committee On Political Education)

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		0	1		2	0	1	5		

To:

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		3	1		2	0	1	5		

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	202.00	202.00
(ii) Unitemized	2325245.28	2325245.28
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	2325447.28	2325447.28
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2325447.28	2325447.28
12. Transfers From Affiliated/Other Party Committees.....	16245.25	16245.25
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	5000.00	5000.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	2346692.53	2346692.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2346692.53	2346692.53

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	312411.41	312411.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	312411.41	312411.41
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	20000.00	20000.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	1620457.21	1620457.21
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1952868.62	1952868.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1952868.62	1952868.62

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	2325447.28	2325447.28
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2325447.28	2325447.28
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	312411.41	312411.41
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	312411.41	312411.41

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFH`G7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: F3XN

Transaction ID :

On January 7, 2015, SEIU COPE received \$21,453 in contributions from Local 509, a collecting agent for the committee. Shortly after depositing the contributions, Local 509 notified the committee that they had miscalculated the amount of payroll contributions for the month and erroneously sent the committee an extra \$5000. The \$5000 is reported as a receipt on Schedule A, Line 17 of this report and the subsequent refund back to Local 509 is disclosed on Schedule B, Line 29. The actual contributions received via payroll deduction from Local 509 do not meet the itemization threshold and are included on Line 11(a)(ii) of this report's summary pages.

Form/Schedule:

Transaction ID:

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 28

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

Full Name (Last, First, Middle Initial)

A. Mary Kay Henry

Mailing Address 1519 12th St NW

City

Washington

State

DC

Zip Code

20005-4433

FEC ID number of contributing
federal political committee.

C

Name of Employer

SEIU

Occupation

Executive Board Member

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 27 / 2015

Transaction ID : C6797007

Amount of Each Receipt this Period

202.00

* Payroll Deduction: \$101.00 Bi-Weekly

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
/ / /

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
/ / /

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

202.00

TOTAL This Period (last page this line number only)..... ►

202.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 28

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

Full Name (Last, First, Middle Initial)

A. Workers United for Political Power Campaign Comm.

Mailing Address 31 WEST 15TH STREET 3RD FLOOR
POLITICAL DEPARTMENT

City	State	Zip Code
NEW YORK	NY	10011

FEC ID number of contributing federal political committee.

C C00462044

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16245.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		2	1		2	0	1	5		

Transaction ID : C6769902

Amount of Each Receipt this Period

19.00

Transfer

Full Name (Last, First, Middle Initial)

B. Workers United for Political Power Campaign Comm.

Mailing Address 31 WEST 15TH STREET 3RD FLOOR
POLITICAL DEPARTMENT

City	State	Zip Code
NEW YORK	NY	10011

FEC ID number of contributing federal political committee.

C C00462044

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16245.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		2	1		2	0	1	5		

Transaction ID : C6769903

Amount of Each Receipt this Period

4650.88

Transfer

Full Name (Last, First, Middle Initial)

C. Workers United for Political Power Campaign Comm.

Mailing Address 31 WEST 15TH STREET 3RD FLOOR
POLITICAL DEPARTMENT

City	State	Zip Code
NEW YORK	NY	10011

FEC ID number of contributing federal political committee.

C C00462044

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16245.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	1		2	1		2	0	1	5		

Transaction ID : C6769904

Amount of Each Receipt this Period

2721.87

Transfer

SUBTOTAL of Receipts This Page (optional)..... ►

7391.75

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 28

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

Full Name (Last, First, Middle Initial)

A. Workers United for Political Power Campaign Comm.

Mailing Address 31 WEST 15TH STREET 3RD FLOOR
POLITICAL DEPARTMENT

City	State	Zip Code
NEW YORK	NY	10011

FEC ID number of contributing
federal political committee.

C C00462044

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16245.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	1		2	0	1	5

Transaction ID : C6769905

Amount of Each Receipt this Period

418.85

Transfer

Full Name (Last, First, Middle Initial)

B. Workers United for Political Power Campaign Comm.

Mailing Address 31 WEST 15TH STREET 3RD FLOOR
POLITICAL DEPARTMENT

City	State	Zip Code
NEW YORK	NY	10011

FEC ID number of contributing
federal political committee.

C C00462044

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16245.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	1		2	0	1	5

Transaction ID : C6769906

Amount of Each Receipt this Period

5583.35

Transfer

Full Name (Last, First, Middle Initial)

C. Workers United for Political Power Campaign Comm.

Mailing Address 31 WEST 15TH STREET 3RD FLOOR
POLITICAL DEPARTMENT

City	State	Zip Code
NEW YORK	NY	10011

FEC ID number of contributing
federal political committee.

C C00462044

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16245.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	1		2	0	1	5

Transaction ID : C6769907

Amount of Each Receipt this Period

146.10

Transfer

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6148.30

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 28

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	------------------------------	--	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

Full Name (Last, First, Middle Initial)

A. Workers United for Political Power Campaign Comm.

Mailing Address 31 WEST 15TH STREET 3RD FLOOR
POLITICAL DEPARTMENT

City State Zip Code
NEW YORK NY 10011

FEC ID number of contributing
federal political committee.

C C00462044

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16245.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	1		2	0	1	5

Transaction ID : C6769908

Amount of Each Receipt this Period

2572.70

Transfer

Full Name (Last, First, Middle Initial)

B. Workers United for Political Power Campaign Comm.

Mailing Address 31 WEST 15TH STREET 3RD FLOOR
POLITICAL DEPARTMENT

City State Zip Code
NEW YORK NY 10011

FEC ID number of contributing
federal political committee.

C C00462044

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16245.25

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		2	1		2	0	1	5

Transaction ID : C6769909

Amount of Each Receipt this Period

132.50

Transfer

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

2705.20

TOTAL This Period (last page this line number only)..... ►

16245.25

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 28
(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

Full Name (Last, First, Middle Initial)

A. SEIU Local 509

Mailing Address 400 Talcott Ave Bldg 131 2nd flr

City State Zip Code
 Watertown MA 02472

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 01 07 2015

Transaction ID : C6796479

Amount of Each Receipt this Period

5000.00

See Refund on Schedule B, Line 29

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

5000.00

5000.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

SEIU COPE (Service Employees International Union Committee On Political Education)

A. Corner 10 Productions

Category/
Type

6000.00

State: District:

B. Florida Alliance

MM / DD / YYYY

Category/
Type

30000.00

State: District:

C. The Strategy Group

Category/
Type

72733.85

State: District:

108733.85

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

SEIU COPE (Service Employees International Union Committee On Political Education)

7.95

State: District:

40.00

State: District:

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Percentage of students who did not pass the exam
47.95

312338.33

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 OF 28

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

Full Name (Last, First, Middle Initial)

A. Citizen Action for Political Education

Mailing Address 805 SW Broadway, Ste. 2700

City	State	Zip Code
Portland	OR	97205

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2015

Transaction ID : D353945

Amount of Each Disbursement this Period

128524.23

Full Name (Last, First, Middle Initial)

B. Local 1199ne

Mailing Address 77 Huyshope Avenue

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		08		2015

Transaction ID : D352210

Amount of Each Disbursement this Period

7295.00

Full Name (Last, First, Middle Initial)

C. Public School Employees of Washington

Mailing Address PO Box 798

City	State	Zip Code
Auburn	WA	98071

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2015

Transaction ID : D352748

Amount of Each Disbursement this Period

15049.54

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

150868.77

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

Full Name (Last, First, Middle Initial)

A. SEIU Healthcare Minnesota

Mailing Address 345 Randolph Ave Ste 100

City	State	Zip Code
Saint Paul	MN	55102

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		08		2015

Transaction ID : D352207

Amount of Each Disbursement this Period

28464.00

Full Name (Last, First, Middle Initial)

B. SEIU Healthcare Minnesota

Mailing Address 345 Randolph Ave Ste 100

City	State	Zip Code
Saint Paul	MN	55102

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		08		2015

Transaction ID : D352208

Amount of Each Disbursement this Period

85000.00

Full Name (Last, First, Middle Initial)

C. SEIU Healthcare PA

Mailing Address 1500 N Second Street

City	State	Zip Code
Harrisburg	PA	17102

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		08		2015

Transaction ID : D352211

Amount of Each Disbursement this Period

6500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

119964.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

Full Name (Last, First, Middle Initial)

A. SEIU Local 221 Independent Expenditure PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	22	/	2015

Mailing Address 420 Montgomery St.

Transaction ID : D352779

City	State	Zip Code
San Francisco	CA	94104

Amount of Each Disbursement this Period

Purpose of Disbursement
Non-Federal Contribution

Category/
Type

15543.01

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. SEIU Local 509

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2015

Mailing Address 400 Talcott Ave Bldg 131 2nd flr

Transaction ID : D354009

Amount of Each Disbursement this Period

City	State	Zip Code
Watertown	MA	02472

Purpose of Disbursement
Correction of Misdeposits

Category/
Type

5000.00

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. SEIU Local 521

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	08	/	2015

Mailing Address 4100 Empire Drive Suite 150

Transaction ID : D354001

Amount of Each Disbursement this Period

City	State	Zip Code
Bakersfield	CA	93309

Purpose of Disbursement
Non-Federal Contribution

Category/
Type

19600.00

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

40143.01

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

Full Name (Last, First, Middle Initial)

A. SEIU Local 721

Mailing Address 1545 Wilshire Blvd

City	State	Zip Code
Los Angeles	CA	90017

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2015

Transaction ID : D352918

Amount of Each Disbursement this Period

617083.14

Full Name (Last, First, Middle Initial)

B. SEIU Local 73

Mailing Address 1165 N Clark Street Suite 500

City	State	Zip Code
Chicago	IL	60610-2845

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		08		2015

Transaction ID : D352206

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

C. SEIU Local 775

Mailing Address 33615 1st Way South, Ste A

City	State	Zip Code
Federal Way	WA	98003

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2015

Transaction ID : D352747

Amount of Each Disbursement this Period

253958.82

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

881041.96

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

Full Name (Last, First, Middle Initial)

A. SEIU UHW West Political Issues Account

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2015

Mailing Address 560 Thomas L Berkeley Way

City	State	Zip Code
Oakland	CA	94612

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Category/
Type**Transaction ID : D352917**

Amount of Each Disbursement this Period

294509.74

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. SEIU UHW West Political Issues Account

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		22		2015

Mailing Address 560 Thomas L Berkeley Way

City	State	Zip Code
Oakland	CA	94612

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Category/
Type**Transaction ID : D352778**

Amount of Each Disbursement this Period

133929.73

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

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Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

428439.47

1620457.21

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

1199 SEIU UHE

Nature of Debt (Purpose):

Direct Mail Postage

Mailing Address 310 West 43rd Street

City State

New York

Zip Code

NY

10036

Outstanding Balance Beginning This Period

4688.18

Transaction ID : D318325

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4688.18

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Adelstein Liston

Nature of Debt (Purpose):

TV Advertising Production

Mailing Address 222 W. Ontario St.

Suite 600

City State

Chicago

Zip Code

IL

60654

Outstanding Balance Beginning This Period

6750.00

Transaction ID : D299807

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6750.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Berlin Rosen

Nature of Debt (Purpose):

Radio Advertising Production

Mailing Address 15 Maiden Lane #1600

City

New York

State

NY

Zip Code

10038

Outstanding Balance Beginning This Period

2800.00

Transaction ID : D309812

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2800.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

14238.18

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 21 OF 28

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Chambers Lopez Strategies

Nature of Debt (Purpose):

Online Advertising Buy, TV & Radio Ad
Production

Mailing Address PO Box 5539

City State

Zip Code

Arlington

VA

22205

Outstanding Balance Beginning This Period

36350.00

Transaction ID : D287106

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

36350.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Elevation, Ltd.

Nature of Debt (Purpose):

Online Advertising Buy

Mailing Address 1027 33rd Street, NW

Suite 260

City State

Zip Code

Washington

DC

20007

Outstanding Balance Beginning This Period

100040.00

Transaction ID : D289787

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100040.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Google

Nature of Debt (Purpose):

Online Advertising Buy

Mailing Address 1600 Ampitheatre Parkway

City

State

Zip Code

Mountain View

CA

94043

Outstanding Balance Beginning This Period

434.38

Transaction ID : D287115

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

434.38

1) **SUBTOTALS** This Period This Page (optional)..... ►

136824.38

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Image PointeNature of Debt (Purpose):
T-Shirts

Mailing Address P O Box 657

City State

Zip Code

Waterloo

IA

50704

Outstanding Balance Beginning This Period

41949.50

Transaction ID : D304068

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

41949.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mack/Crouse Group LLCNature of Debt (Purpose):
Voter Canvass Literature

Mailing Address 4900 Seminary Road Suite 1020

City State

Zip Code

Alexandria

VA

22311

Outstanding Balance Beginning This Period

4533.86

Transaction ID : D299810

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4533.86

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mass UnitingNature of Debt (Purpose):
Canvassing Services from 3/26-4/30 & 5/13-6/25

Mailing Address 150 Mt. Vernon St., 2nd Floor

City

State

Zip Code

Boston

MA

02125

Outstanding Balance Beginning This Period

33100.00

Transaction ID : D312556

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

33100.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

79583.36

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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(check only one)
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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mele Printing

Nature of Debt (Purpose):

Estimated Cost for Canvass Literature Printing

Mailing Address 619 N. Tyler Street

City State

Zip Code

Covington

LA

70433

Outstanding Balance Beginning This Period

3800.00

Transaction ID : D352706

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3800.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mission Control Inc

Nature of Debt (Purpose):

Voter Canvass Literature

Mailing Address 114A Mansfield Hollow Road

City State

Zip Code

Mansfield Center

CT

06250

Outstanding Balance Beginning This Period

1776.40

Transaction ID : D297651

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1776.40

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Murphy Vogel Askew Reilly LLC

Nature of Debt (Purpose):

TV & Radio Advertising Production

Mailing Address 901 North Washington Street

Suite 400

City

State

Zip Code

Alexandria

VA

22314-1535

Outstanding Balance Beginning This Period

1593.75

Transaction ID : D299791

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1593.75

1) **SUBTOTALS** This Period This Page (optional)..... ►

7170.15

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

NGP VAN, Inc.

Nature of Debt (Purpose):

Voter Outreach Telephone Calls

Mailing Address 48 Grove Street, Suite 202

City State

Zip Code

Somerville

MA

02144

Outstanding Balance Beginning This Period

1500.00

Transaction ID : D304071

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1500.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Pitney Bowes

Nature of Debt (Purpose):

Direct Mail Postage

Mailing Address 1 Elmcroft Road

City State

Zip Code

Stamford

CT

06926

Outstanding Balance Beginning This Period

205.69

Transaction ID : D348408

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

205.69

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SEIU General Fund

Nature of Debt (Purpose):

Est. Payment for Salary & Benefits/Canvassing
Services/Posters

Mailing Address 1800 Massachusetts Ave NW

City

State

Zip Code

Washington

DC

20036

Outstanding Balance Beginning This Period

14849.75

Transaction ID : D274285

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

14849.75

1) **SUBTOTALS** This Period This Page (optional)..... ►

16555.44

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)
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☒ 10

NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SEIU Local 105

Nature of Debt (Purpose):

Estimate for Rally Expenses

Mailing Address 2525 W Alameda Ave
2nd FlCity State Zip Code
Denver CO 80219

Outstanding Balance Beginning This Period

5423.18

Transaction ID : D344307

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5423.18

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SEIU Local 1989 - Maine State Emp Assoc

Nature of Debt (Purpose):

Voter Outreach Calls

Mailing Address 65 State Street
P O Box 1072City State Zip Code
Augusta ME 04332

Outstanding Balance Beginning This Period

5000.00

Transaction ID : D313877

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SEIU Local 521

Nature of Debt (Purpose):

Estimate for Rally Expenses

Mailing Address 4100 Empire Drive Suite 150

City State Zip Code
Bakersfield CA 93309

Outstanding Balance Beginning This Period

370.00

Transaction ID : D344308

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

370.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

10793.18

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
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☒ 10

NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SEIU MA State CouncilNature of Debt (Purpose):
Direct Mail PrintingMailing Address 145 Tremont Street
Suite 202City State Zip Code
Boston MA 02111

Outstanding Balance Beginning This Period

2975.33

Transaction ID : D318326

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2975.33

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Spotset Radio NetworkNature of Debt (Purpose):
Radio Advertising ProductionMailing Address 44 N. Second Street
Suite 800City State Zip Code
Memphis TN 38103

Outstanding Balance Beginning This Period

2100.00

Transaction ID : D304146

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2100.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Standard Modern CompanyNature of Debt (Purpose):
Direct Mail

Mailing Address 47 Pleasant Street

City State Zip Code
Brockton MA 02301

Outstanding Balance Beginning This Period

114.35

Transaction ID : D348409

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

114.35

1) **SUBTOTALS** This Period This Page (optional)..... ►

5189.68

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 27 OF 28

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

SEIU COPE (Service Employees International Union Committee On Political Education)

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Waterfront Strategies

Nature of Debt (Purpose):

TV & Radio Advertising Production/Buys

Mailing Address 1010 Wisconsin Avenue, NW
Suite 800City State Zip Code
Washington DC 20007

Outstanding Balance Beginning This Period

15037.22

Transaction ID : D297653

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15037.22

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Wisconsin Jobs Now

Nature of Debt (Purpose):

Radio Advertising Buy

Mailing Address PO BOX 511506

City State Zip Code
Milwaukee WI 53203

Outstanding Balance Beginning This Period

9075.00

Transaction ID : D304072

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

9075.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

24112.22

2) **TOTALS** This Period (last page this line number only)..... ►

294466.59

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

294466.59

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 28 OF 28
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) SEIU COPE (Service Employees International Union Committee On Political Education)		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00004036 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee Chambers Lopez Strategies		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 21 / 2014</div> </div>	
Mailing Address PO Box 5539		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">15000.00</div>	
City Arlington	State VA	Zip Code 22205	Transaction ID : D354030 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 01 / 29 / 2015</div> </div>
Purpose of Expenditure Additional TV Advertising Production Cost for IE Disclosed on 10/22 24-HR Notice and Post-Gen. Rpt.		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate CORY GARDNER		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">20000.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Chambers Lopez Strategies		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 10 / 21 / 2014</div> </div>	
Mailing Address PO Box 5539		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">5000.00</div>	
City Arlington	State VA	Zip Code 22205	Transaction ID : D354031 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY 01 / 29 / 2015</div> </div>
Purpose of Expenditure Additional TV Advertising Production Cost for IE Disclosed on 10/22 24-HR Notice and Post-Gen. Rpt.		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">004</div>	
Name of Federal Candidate Mark Udall		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CO</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">20000.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">20000.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">20000.00</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Michael P. Fishman

[Electronically Filed]

Date

MM / DD / YYYY
02 / 20 / 2015

Signature